SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
 Planning and Zoning Depart.
 PQ Box 58
 Washburn, WI 54891
 (715) 373-6138

t/3

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received) UV

3AR 192014

THERED Permit #: Date: Refund: Amount Paid: \$1753-19-14 でので

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED

HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp)

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Tron River (Person Signing Application on behalf of Owner(s)) PROJECT DECATION Legal Description: (Use Tax Statement) NE 1/4, NE 1/4 Description: (Use Tax Statement) Description: Lot(s) Lot(s) No. Block(s) No. Subdivision: Property: City/State/Zip: Tron River Phone: Plumber: Contractor Phone: Plumber: Agent Phone: Agent Mailing Address (include City/State/Zip): Agent Mailing Address (include City/State/Zip): PROJECT Legal Description: (Use Tax Statement) Description: Lot(s) CSM Vol & Page Lot(s) No. Block(s) No. Subdivision:	75	Acreag		Lot Size			Town of:	$ \omega $	46	, Townsh	i	
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	715	유			tate/Zip:	City/s			100		Owner's Name:	

Address to send permit

SOME

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Dove

Authorized Agent:

(If you are signing on behalf

of the owner(s) a letter of authorization

must accompany this application)

Attach

Copy of Tax Statement V

If you recently purchased the property send your Recorded Deed

Date

Date

3-19-14

Owner(s): X A LUTY (If there are Multiple Owners listed on the Deed All Owners

s must sign or letter(s) of authorization must accompany this application)

Hold For Sanitary: Granted by Variance (B.O.A.) Issuance Information (County Use Only) Inspection Record: Permit Denied (Date): Setback to **Drain Field** Setback from the **South** Lot Line Setback from the **West** Lot Line Setback from the **East** Lot Line Setback from the North Lot Line Signature of Inspector: Condition(s):Town, Committee Date of Inspection: Setback to Privy (Portable, Composting)

Note: The placement or construction of a structure within ten (10) feet of the minimum of the proviously surveyed corner or marked by a licensed surveyor at the owner's expense. Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Setback to Septic Tank or Holding Tank Was Parcel Legally Created
Was Proposed Building Site Delineated or to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from e previously surveyed corner to the other previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be previously a licensed surveyor at the owner's expense. Please complete (1) - (7) above (prior to continuing) 1601-conforming su officaint [2] [3] [4] [5] [6] (9) the Centerline of Platted Road the Established Right-of-Way 657 Show any (*): Show any (*): Show: Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W) Show: Setbacks: (measured to the closest point) Show / Indicate: Show Location of (*): NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code
The local Town, Village, City, State or Federal agencies may also require permits. show Location of: Description Traw or Sketch your Property (regardless of what you are applying for) Case #: □ Yes (Deed of Record)
□ Yes (Fused/Contiguous Lot(s))
★ Yes OHw M Hold For TBA: Bel Rocks ¥ZYes □ No Shudhe. Proposed Construction unan Inspected by: Sanitary Number: Permit Date: Reason for Denial: 405 E Measurement イイケア Z ر حرا حرا Hold For Affidavit: Feet in the line of the line o 481 なら □ X X 8 8 8 Feet Feet Feet Feet Feet albere S. C. C. 00 32 Ī Mitigation Required Mitigation Attached Previously Granted by Variance (B.O.A.)

| Yes | No Setback from Wetland
Setback from 20% Slope Area
Elevation of Floodplain Were Property Lines Represented by Owner
Was Property Surveyed Setback from the River, Stream, Creek
Setback from the Bank or Bluff 70 dary line from which the setback must be measured must be visible from one previously surveyed Setback to Well Setback from the Lake (ordinary high-water mark of ect need to be existing OHW attached.) Changes in plans must be approved by the Planning & Zoning Dept. Hold For Fees: "fotprint # of bedrooms: **U** 'X Yes '}Yes Description 50+ 8 8 unstudica Affidavit Required Affidavit Attached Sanitary Date: 76-0 X Yes Lakes Classification Zoning District Date of Re-Inspection: Date of Approval: 2 ≥ S 20 Z Z 20 Z Z Measurement X Yes (K) 5 00 corner to the □ No □ No Feet Feet Feet Feet Feet Feet